

PTO/SB/01 (6-95)
Approved for use inrough: 10/31/98 OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Type a plus sign (+) inside this box + H 5332 PCT/US U.S. Department of Commerce Patient and Trademark Office Attorney Docket 0010/PTO Re+ 6/95 Number Kessler et al. First Named **DECLARATION FOR** COMPLETE IF KNOWN UTILITY OR DESIGN 10/764,232 Application Number PATENT APPLICATION Filing Date Group Art Unit Declaration OR | X Declaration Supmitted after Submitted Examiner Name Initial Filing with Initial Filing As a pelow named inventor, I hereby declars that My residence, post office address, and cruzenship are as stated below next to my name I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Dishwashing Machine Detergents with Low Viscose Surfactants (Title of the Invention) the specification of which ів апасней пелето as United States Application Number or PCT International OR was filed on (MM/DD/YYYY) 07/13/2002 (it applicable). and was amended on (MW/DD/YYYY) Аррксатол Number PCT/EP02/07822 I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any аттепителт specifically referred to above Lacknowledge the duty to disclose information which is material to paternability as defined in Title 37 Code of Federal Regulations, §1.58 I hereby claim foreign priority benefits under Title 35. United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) or any PCT international application which designated at least one country other than the United States of America, listed below and nave also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a hingi date before that of the application on which priority is claimed. Certified Copy Attached? foreign Filing Date (MM/DD/YYYY) Country NO YES Prior Foreign Application Number(8) Not Claimed 07/24/2001 Germany 101 36 001.0 Additional foreign application numbers are listed on a supplemental priority sheat attached nereto I nereby claim the penefit under Title 35, United States Code §119(a) of any United States provisional application(s) listed below Filing Date (MM/DD/YYYY) аррысавол питьега Application Number(s) are listed on a supplemental priority sheet attached hereto

Burden Hour Statement. This form is estimated to take 4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patient and Trademain Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patients, Washington DC 20231

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